



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
600 Washington Street
Boston, MA 02111
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Eligibility Operations Memo 06-06
April 2006

TO: MassHealth Eligibility Operations Staff

FROM: Russ Kulp, Director, MassHealth Operations

RE: **Changes to Children's Medical Security Plan (CMSP)**

Introduction

This memo introduces three changes to the Children's Medical Security Plan (CMSP):

- the way MassHealth determines CMSP benefits for children who are identified as potentially disabled;
- new CMSP premium and copayment amounts; and
- information about the use of administrative Action Reason 17 (AR 17).

Affected Population

These changes affect children who are under age 19 and do not qualify for any other MassHealth coverage type, other than MassHealth Limited.

The change for children who are potentially disabled does **not** affect children who are not citizens and who are eligible for MassHealth Limited or CMSP with a family income below 200% of the federal poverty level (FPL).

Eligibility Determination Change

Effective April 3, 2006, a potentially disabled child who is awaiting a Disability Determination Unit (DDU) decision will now "pend" instead of being determined into a CMSP benefit.

This new eligibility determination logic will route a disabled child directly into the appropriate CommonHealth benefit and will eliminate the interim CMSP approval and premium billing.

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**Revised CMSP
Premiums and
Copayments**

Effective November 1, 2005, CMSP premiums and copayments were revised. CMSP premiums and copayments are determined by comparing the family group gross income to the applicable FPL range.

Monthly Premiums				
% of FPL	0-199.9%	200-300.9%	301-400%	400.1% and above
Premium	None	\$7.80 per child/\$23.40 per family (maximum)	\$33.14 per family	\$38.99 per child
Copayments				
% of FPL	0-199.9%	200-300.9%	301-400%	400.1% and above
Medical (non-preventive)	\$2	\$5	\$5	\$8
Dental	\$2	\$4	\$4	\$6
Pharmacy	\$3 for each generic drug prescription \$4 for each brand-name drug prescription			

**Administrative
Action Reason 17**

Members who fail to pay CMSP premiums may be terminated from the benefit with AR 17. These members lose only the CMSP benefit. Other benefits, such as Uncompensated Care Pool (UCP) and MassHealth Limited, will continue.

UniCare will send a list of members who should be closed with AR 17 to the Central Office Liaison. The Liaison is responsible to coordinate the appropriate data entry of (or removal of) AR 17 for CMSP enrollees.

The use of AR 17 impacts premium reimbursement accounts and requires coordination between the MassHealth vendor and program managers. Therefore, Central Office will be responsible for the management and coordination of this action reason.

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Protecting CMSP Benefits	MA21 systems capability to “protect” a CMSP case is limited to the Board of Hearings (BOH) and Central Office staff. Other than a BOH requirement, if MassHealth Enrollment Center (MEC) staff have questions or concerns about retroactive protection of a CMSP case, refer the issue through your MEC designee to the Policy Hotline.
Customer Service for CMSP Enrollees	MEC staff is responsible for eligibility-related issues for CMSP enrollees. UniCare customer service staff is responsible for any premium-related activities and claims-related issues. The CMSP Customer Service telephone number is 1-888-488-9161.
MA21 Noticing	The MA21 noticing system has been updated with new language to reflect these changes to CMSP.
Questions	If you have any questions about this memo, please have your MEC designee contact the Policy Hotline.
